

Diesel Truck and Bus Information Survey

The California Air Resources Board is gathering information about heavy-duty diesel vehicles and their operations. This data will be used to better understand the age and use of diesel vehicles used in different operations such as long-haul, local delivery, and other types of operations. If you choose to fill out the survey, you will be asked for your contact information, your company information, and information about your fleet vehicles. You may keep your company information confidential by checking the box at the top of the Company Information table.

Who should complete this survey? Any person, business or corporation that owns or is leasing, for twelve months or more, any diesel powered truck, bus, pickup, or other vehicle. If you have a large number of vehicles, you may contact us for other methods to receive your information. Please contact Ms. Jackie Johnson at (916) 323-2750.

Please send the completed survey to:

Ms. Jackie Johnson
Truck and Bus Survey
Air Resources Board/Mobile Source Control Division
1001 I Street Sacramento, CA 95812

OR Fax: (916) 323-5526 Attn: Jackie Johnson

I. COMPANY INFORMATION:								
Check box to keep information conf	idential:							
Company/Subsidiary Name:	Parent Company Name: Email address: Contact Conta							
Business Telephone:	Email address:		Contact Name and Title:					
What are your Carrier ID#s? Provid	le all that apply:	I						
CA#: IRP#:	IFTA#:		USDOT#:					
Ownership Type: Private Business Federal Government State Government Other Government Non-Profit								
Number of employees nationwide (circle one): 0, 1, 2, 3, 4, 5, 6 to 10, 10 to 50, 51 to 100, 101 to 250, 251 to 500, >500								
Number of employees in California (circle one): 0, 1, 2, 3, 4, 5, 6 to 10, 10 to 50, 51 to 100, 101 to 250, 251 to 500, >500								
Gross revenue (pre-tax 2006): _\$_								
Approximate value of total business	assets: _\$							
Total horsepower of equipment (>24 hp) subject to the CA Off-road Diesel Vehicle Rule: hp								
Total horsepower of equipment (>49	9 hp) subject portable equipment re	egulatio	on:hp					
II. BUSINESS OPERATION:								
Primary Business Use Category (se	lect one):							
Dwnership Type: Private Business Federal Government State Government Other Government Non-Profit dumber of employees nationwide (circle one): 0, 1, 2, 3, 4, 5, 6 to 10, 10 to 50, 51 to 100, 101 to 250, 251 to 500, >500 dumber of employees in California (circle one): 0, 1, 2, 3, 4, 5, 6 to 10, 10 to 50, 51 to 100, 101 to 250, 251 to 500, >500 Gross revenue (pre-tax 2006): _\$								
Number of trucks/buses you own na	ationwide (or lease >12 months):							
How many different trucks/buses op								
Portion of fleet that is leased more t	10%	20% 30% 40% 50% 60% 70% 80% 90% 100%						
If you lease vehicles, what type of le	ease do you commonly use?							

III. FLEET LOCATION: This section dispatched from a given location information about the vehicles op copies of this page.	(ie. terminal, subsidia	ry, or	garage).	In this section	, please e	enter
Create name of fleet location (to use	with vehicle information	n):				
Zip code of fleet location:						
Number of vehicles operated from the	is location:					
Where do these vehicles travel? (Ch	eck all that apply.):		□ Ca	llifornia Other	states 🗆 C	Canada Mexico
IV. VEHICLES TRAVELING ONLY information about your vehicles that						•
Number at this location that stay in		iia, (tii	1030 Willi	zamornia, ol, c	or no plate	
2. Approximate radius of operation in			Frage	8-N	ortheast Plateau	r
3. Indicate your common areas of op. California (check all that apply): 1-North Coast 2-Lake County 3-San Francisco Bay Are 4-North Central Coast 5-South Central Coast 6-South Coast 7-San Diego 8-Northeast Plateau 9-Sacramento Valley 10-Mountain Counties 11-San Joaquin Valley 12-Great Basin Valleys 13-Mojave Desert 14-Salton Sea		B-4 - North	53		\	
V. VEHICLES TRAVELING OUTSI						
1. Number at this location that opera	te in & out of California	ı:				
2. Approximate radius of operation in	n miles:		1-10 1	0-50 51-100	101-250	251-500 >500
3. Portion of total miles that occur in CA			0% 10% 20	0% 30% 40% 50	% 60% 70%	% 80% 90% 100%
4. For these vehicles, provide best	North-South H	ighwa	<u>ys</u> :	East-	-West Higl	hwa <u>ys</u> :
estimate (in 10% increments) of where the CA miles occur (the sum	<u>Hwy 1</u> :			Interstate 80:		%
should add up to 100%):	Hwy 101:	%		Interstate 15:		%
	Interstate 5:	%		% Interstate 40:		%
	<u>Hwy-99</u> :	%		% Interstate 10:		%
	<u>Hwy-395</u> :		%	Interstate 8:		%
	Other N-S:		%	Other E-W:		%

VI. VEHICLE INFORMATION: (Ple	ase prii	nt out or o	copy m	ore pages	if nece	essary.)				
Vehicle Count (1, 2, 3)	#		#		#_		#_		#_	
Fleet Location (from Section III)										
Your Fleet Vehicle I.D #:										
Vehicle Make:										
Vehicle Model:										
Vehicle Model-year:										
Engine make:										
Engine model year if different:										
Cab type										
(Conventional, Sleeper, Cab-over, Other):										
, , , , , , , , , , , , , , , , , , , ,	st of true	ck body ty	ne or tr	ailer type (for next	two items	;)		1	
Beverage Drill Rig Bucket/Boom Drop deck Bus/Shuttle Dump, bottom Cab & Chassis Dump, end Car Carrier Dump, side Crane Dump/Transfer Curtain side Hot Shot Commodities Farm/Grain Double drop	F Flatk Fu Garba Garba G	latbed led/Dump el/Lube lge: Packer ge: Roll-off rapple looklift per/grain	Li L L Mixe Mc	ve floor vestock ogging owboy r/Concrete ottorhome Pickup //Spreader	Pneur S Serv Tanl	m./dry bulk Pup alvage vice/Utility Stake Tag k: Asphalt : Chemical	Tank Tai Ta Tank Tan Tow:	: Liq. Fuel nk: LPG nk: Milk : Vacuum k: Water Toter Roll-back Wrecker	Va Van Van V V	ractor an: Dry : Moving : Reefer arious Winch d Spotter Other
Truck body type (power unit):										
Trailer type most commonly pulled										
Number of axles on power unit:										
Registered gross combined weight										
rating (lbs):										
If the vehicle visited any of the										
major ports or railyards, indicate the										
number of visits in 2006:										
License plate type (CA only, Apportioned, SE, Seasonal, None):										
If apportioned plate, enter state:										
If seasonal plate, enter # of months of year:										
Total miles driven in 2006:										
Total miles driven in CA in 2006:										
Approximate odometer reading:										
Total fuel used in 2006 (gallons):										
Year you purchased this vehicle?:										
Year of last rebuild:										
Year you would normally replace it:										
Does vehicle have low resistance tires?:	☐ Yes	□No	☐ Yes	□No	☐ Yes	□No	☐ Yes	□No	☐ Yes	□No
Does vehicle have a faring?:	☐ Yes	□No	☐ Yes	□No	☐ Yes	☐ No	☐ Yes	☐ No	☐ Yes	☐ No
Does vehicle have a 2nd engine?:	☐ Yes	☐ No	☐ Yes	□No	☐ Yes	☐ No	☐ Yes	☐ No	☐ Yes	☐ No
2nd engine annual hrs of operation:		hours		hours		hours		hours		Hours
Second engine fuel type: (Diesel, Natural gas, Electric, Combination, Other)										
Does vehicle have power take off (PTO)?	☐ Yes	□No	☐ Yes	□No	☐ Yes	□No	☐ Yes	□No	☐ Yes	□No
PTO annual hours of operation:										
Temperature management APU (Diesel, Alternative fuel, Electric, None):										

VI. VEHICLE INFORMATION: (Please print out or copy more pages if necessary.)								
Vehicle Count (1, 2, 3)	#	#	#	#	#			
Describe primary use of vehicle:								
Seasons of use (check all that apply):	□ Spring □ Summer □ Fall □ Winter □ Year round	☐ Spring ☐ Summer ☐ Fall ☐ Winter ☐ Year round	☐ Spring ☐ Summer ☐ Fall ☐ Winter ☐ Year round	☐ Spring ☐ Summer ☐ Fall ☐ Winter ☐ Year round	☐ Spring ☐ Summer ☐ Fall ☐ Winter ☐ Year round			
Miles/year in agricultural service:								